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PTO/SB/01 (10-00)

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) Unexecuted <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	DEP5286	
	First Named Inventor	Chunlin Yang, et al.	
	COMPLETE IF KNOWN		
	Application Number		
	Filing Date	March 31, 2004	
	Group Art Unit		
Examiner Name			

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FLOWABLE BONE GRAFTS
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

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AND

☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to William K. Wissing at telephone number (732) 524-6201.

Direct all correspondence to: Customer Number ☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

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City:

State:

ZIP

Country

Telephone:

Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Chunlin

Family Name
or Surname Yang

Inventor's
Signature

Date

Residence: City Belle Mead

State NJ

Country USA

Citizenship USA

Mailing Address 93 Mathews Farm Road

City Belle Mead

State NJ

ZIP 08502

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Jacky

Family Name
or Surname Au-Yeung

Inventor's
Signature

Date

Residence: City San Francisco

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Citizenship USA

Mailing Address 2564 San Jose Avenue

City San Francisco

State CA

ZIP 94112

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Iksoo

Family Name
or Surname Chun

Inventor's
Signature

Date

Residence: City Princeton

State NJ

Country USA

Citizenship USA

Mailing Address 269 Shady Brook Lane

City Princeton

State NJ

ZIP 08540

Country South Korea

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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Mark

Family Name
or Surname Davis

Inventor's
Signature

Date

Residence: City San Jose,

State CA

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Citizenship USA

Mailing Address 4501 Snell Avenue, #1308

City San Jose,

State CA

ZIP 95136

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Lu

Family Name
or Surname Liu

Inventor's
Signature

Date

Residence: City San Mateo

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Mailing Address 1806 Los Altos Drive

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State CA

ZIP 94402

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Aruna

Family Name
or Surname Nathan

Inventor's
Signature

Date

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State NJ

Country USA

Citizenship India

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City Bridgewater

State NJ

ZIP 08807

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SEVENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Vivek

Family Name
or Surname Shenoy

Inventor's
Signature

Date

Residence: City Sunnyvale,

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Citizenship USA

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State CA

ZIP 94086

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF EIGHTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Mark

Family Name
or Surname Trimmer

Inventor's
Signature

Date

Residence: City Jersey City

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Citizenship Canada

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City Jersey City

State NJ

ZIP 07302

Country USA